



# Basic Peace Officer Certification- TCOLE Course #1000 For Sponsored Cadets

## Alamo Area Regional Law Enforcement Academy

Michael Ritchey, Academy Manager

**Physical Location:**

12625 Wetmore Rd., #436  
San Antonio, TX 78247

**Admissions Contact:**

Lisy Velázquez: [livelazquez@aacog.gov](mailto:livelazquez@aacog.gov)  
[academy@aacog.gov](mailto:academy@aacog.gov)

**Mailing Address:**

2700 NE Interstate Loop 410  
San Antonio, TX 78217

P: 210-362-5291 f: 210-824-5881

[www.aacog.gov/alamo-area-regional-law-enforcement-academy](http://www.aacog.gov/alamo-area-regional-law-enforcement-academy)

[www.aarlea.com](http://www.aarlea.com) Training Platform

**Forms included:**

Registration Form  
Release of Liability and Hold Harmless  
Informed Consent Form  
C-1 – PID Assignment  
TCOLE Minimum Standards  
L2  
L3  
TCOLE Fast Form  
Driving Record Information  
Is the Academy Right for Me?  
BPOC 2025 Class Information  
Sponsoring Agency Check List



# Instructions for Sponsored Cadets

Basic Peace Officer Certification- TCOLE Course #1000

## APPLICANT

1. **Registration Form** – Sponsored applicant must complete and sign the academy's registration form.
2. **Entrance Exam** – If your agency provides an entrance exam, the academy will review/accept a copy of the exam and the applicant's results. Please let us know if the applicant needs to take the entrance exam with the Academy. The cost for the entrance exam at the Academy is \$35 per applicant.
3. **Release of Liability and Hold Harmless Agreement** – Sponsored applicant will need to complete, sign and date form. Form must be notarized.
4. **Informed Consent Form** - Sponsored applicant will need to complete, sign and date form.
5. **Minimum Standards for Initial Licensure** – Please hand the sponsored applicant the form to read on their own.
6. **C-1 – PID Assignment** - Sponsored applicant will need to complete the upper box as legibly as possible, check the two boxes below "Agency administrator or training coordinator..." sign and date it. This acknowledges they received the TCOLE's Minimum Standards for Initial Licensure. If the applicant already has a PID number, they still need to complete the form, and if they know their PID number, have them write it on the upper top corner of the form, if they have one and do not know their PID, have the applicant write "PID" on the same location. The applicant must NOT complete any other section of this form.
7. **Medical / Drugs Screen / Psychological Evaluation** –An L2/Drugs Screen and L3 must be completed. Our academy will approve the L2 and L3 submitted to the academy from an agency medical facility and TCOLE certified psychologists which is regularly used by the agency for their applicants.
8. **Physical Assessment** – Our Academy uses the Concept 2 Rower 2000 meter row. If the sponsoring agency has a similar test and/or the standard Cooper's test, we can accept.

9. **TCOLE FAST Form (Background/Fingerprints)** – Sponsored applicants must complete the FAST Background form per the instructions through <https://identogo.com>. Applicants **MUST USE** the specific codes highlighted in yellow, because they are linked to our academy. Applicants **MUST** complete the FAST background for our academy regardless of completing any prior FAST backgrounds due to TCOLE rules not allowing to share FAST results with other agencies.
10. **Driving Record** – Our Academy requests a driving record. Please have sponsored cadets complete a Type 1 Status Record, by going to the DPS site on the form. Once the applicant receives the record, they will need to email it to the Academy at [academy@aacog.gov](mailto:academy@aacog.gov)
11. **Is the Academy Right for Me?** – Please hand in this form to the applicant to read on their own.
12. **BPOC 2025 Class Information Sheet** – Information about the upcoming academy classes and dress code to adhere while waiting for uniforms.

## AGENCY

13. Please email to the academy items on provided check list.
  - Please remember to provide invoicing information to our academy. The academy will invoice for half of the tuition (\$1900) per cadet, unless requested otherwise by the agency. The academy's BPOC tuition is \$3800 for the course.

### NOTES:

- *TCOLE FAST Form* will be emailed to the academy directly by TCOLE.
- *DRIVING RECORD* should be directly emailed to the academy by the applicant or agency (if driving record is provided to agency by applicant).
- **AGENCY VEHICLE MUST BE PROVIDED TO SPONSORED CADET(S)** when completing the TCOLE Professional Police Driving Course (one week long).
  - ✓ Agency vehicles will only be driven by the corresponding sponsored cadets.
  - ✓ One agency vehicle per total amount of cadets being sponsored.

**PLEASE CONTACT US WITH ANY QUESTIONS:**

210-362-5291 / 210-362-5215

[academy@aacog.gov](mailto:academy@aacog.gov)



# Basic Peace Officer Course Registration and Testing Form

**Entrance Exam Fee \$35**  
 Paid online at [www.aarlea.com](http://www.aarlea.com)

Class #: \_\_\_\_\_

Name:	Date of Birth:	DL:
SSN:	Phone:	ALT. Phone:
Address:	City:	State:
Email:	Zip:	

In case of an Emergency, please notify:

Name:	
Relationship to Cadet:	Phone:
Name:	
Relationship to Cadet:	Phone:

Have you ever served in the U.S. Armed Forces?  Yes  No (Copy of DD214 required)  
 If so, do you plan on utilizing VA Benefits?  Yes  No  
 Are you currently employed by a Law Enforcement Agency?  Yes  No  
 If so, will that agency be sponsoring you during this course?  Yes  No

Agency Name:	
Agency Address :	
Agency Supervisor:	Phone:

Have you ever been enrolled in OR applied to the San Antonio Police Department Academy?  Yes  No

If you were enrolled in OR applied to the San Antonio Police Department Academy, did you complete a Psychological and Emotional Health Declaration (L-3)?

Yes  No

If you answered Yes, please answer below:

Name of Psychologist or Psychiatrist licensed in Texas:	Consultation Approximate Date:
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Have you ever been enrolled in OR applied to another Law Enforcement Academy (other than the San Antonio Police Department Academy)?  Yes  No If Yes, fill out the entire section below:

Academy Name:	Date Attended:
Academy Address:	Phone:
Reason for leaving:	

The following statistical information is requested from TCOLE and the Veterans Administration. Please check the appropriate items.

Gender	Age	Ethnic Background	Check all that apply
<input type="checkbox"/> Male	<input type="checkbox"/> 20 yrs	<input type="checkbox"/> White	<input type="checkbox"/> High School Diploma
<input type="checkbox"/> Female	<input type="checkbox"/> 21-30 yrs	<input type="checkbox"/> African American	<input type="checkbox"/> GED
	<input type="checkbox"/> 31-40 yrs	<input type="checkbox"/> Hispanic	<input type="checkbox"/> 30 college hours or less
	<input type="checkbox"/> 41-50 yrs	<input type="checkbox"/> Asian	<input type="checkbox"/> 31-60 college hours
	<input type="checkbox"/> 51-60 yrs	<input type="checkbox"/> Indian	<input type="checkbox"/> Associates Degree
	<input type="checkbox"/> >61 yrs	<input type="checkbox"/> Other	<input type="checkbox"/> Bachelors Degree
			<input type="checkbox"/> Masters Degree

How did you hear about the AACOG Law Enforcement Academy:

<input type="checkbox"/> AACOG Website	<input type="checkbox"/> Facebook	<input type="checkbox"/> Career Fair
<input type="checkbox"/> X (former Twitter)	<input type="checkbox"/> Friend/Relative	<input type="checkbox"/> Internet Advertisement
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Television	<input type="checkbox"/> Graduate/Cadet
<input type="checkbox"/> Printed Brochure	<input type="checkbox"/> Radio	<input type="checkbox"/> Other : _____
<input type="checkbox"/> JBSA	<input type="checkbox"/> Law Enforcement Agency : _____	

In consideration of attending the Basic Peace Officer Licensing course with the Alamo Area Law Enforcement Academy, I am requesting to be permitted to sit for the pre-enrollment exam as indicated above. I further understand that until the first tuition payment is made my admittance into the Academy is not reserved, and should I default on the tuition my position into the class may be forfeited.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## Alamo Area Law Enforcement Academy

### Release of Liability and Hold Harmless Agreement

In consideration for the Basic Peace Officer and or the Basic Correction Officer Training Courses which includes, but not limited to, firearms training, driver training and mechanics of arrest/tactical training.

\_\_\_\_\_ agrees to indemnify and hold harmless the Alamo Area Council of Governments, the Alamo Area Law Enforcement Academy, its employees, agents and agencies from all costs, charges, claims, demands and liabilities of any kind arising from improper or negligent use of, participation in, or involvement with the Alamo Area Council of Governments and the Alamo Area Law Enforcement Academy.

And that \_\_\_\_\_ further agrees to forever release and discharge the Alamo Area Council of Governments, the Alamo Area Law Enforcement Academy, its agencies and employees from any and all causes of action, including personal injury, illness, death, property damage, costs, charges, claims, demands and liabilities of whatever kind, in a manner arising out of said use.

I further agree to permit the Alamo Area Law Enforcement Academy, to conduct any type of investigation civil or criminal into my background. I understand that information will be placed in my cadet file, and I give permission for the Alamo Area Law Enforcement Academy to release this information to any law enforcement agency making inquires. I further agree that my current mailing address may be released to agencies soliciting cadets for employment.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

By: \_\_\_\_\_

SSN: \_\_\_\_\_

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

My Commission Expires: \_\_\_\_\_

Seal

**Alamo Area Regional Law Enforcement Academy**  
**Informed Consent Form**

The undersigned hereby gives informed consent to engage in a voluntary physical fitness program.

The undersigned understands that there exists the possibility that certain detrimental physiological changes may occur during exercise and exercise testing. These changes could include heat related illness, abnormal heartbeats, abnormal blood pressure and in rare instances, a heart attack. If abnormal changes were to occur, the staff has been trained to recognize symptoms and take appropriate action, including administering CPR and first aid.

I have read this form and understand that there are inherent risks associated with any physical activity and recognize it is my responsibility to provide accurate and complete health/medical history information. Furthermore, it is my responsibility to monitor my individual physical performance during any activity.

In the event of a medical problem, I further recognize that any medical care that may be required is my personal financial responsibility.

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**(Applicant Name Printed)**

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**Signature**

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**Date**

**TEXAS COMMISSION ON LAW ENFORCEMENT**  
 6330 E Highway 290, STE 200, Austin, Texas 78723-1035  
 Phone: (512) 936-7700  
<http://www.tcole.texas.gov>

**PID ASSIGNMENT (C-1)**

**Completion of all fields required.**

**INDIVIDUAL INFORMATION**

1. Social Security Number	2. First Name	3. M.I.	4. Last Name	5. Suffix (Jr., etc.)
6. Race / Ethnicity <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Multicultural <input type="checkbox"/> White		7. Date of Birth / /		8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
10. Home Mailing Address		11. City	12. State	9. Driver's License State: Num.:
14. Height		15. Weight	16. Hair Color	17. Eye Color
18. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Phone Number (include area code)		20. Email	

This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above named individual therein creating a TCOLE record and allowing training to be reported for that individual.

**Agency administrator or training coordinator check appropriate box for their student or employee.**

- Applying for entry into a basic licensing course.
- Applicant has read and received a copy of §217.1 Minimum Standards for Initial Licensure.

\_\_\_\_\_  
 Signature of Applicant Date

- Future appointment as a Telecommunicator, Temporary or Licensed
- Future appointment as a County or Contract Jailer, Temporary or Licensed
- Future Appointment as a Probation Officer, Juvenile or Adult
- Ability to track training hours

TCOLE agency / training provider number \_\_\_\_\_ and Name \_\_\_\_\_

\_\_\_\_\_  
 Agency Administrator or Training Coordinator (Type or Print) Signature Date

**Individuals not associated with a training provider or agency check below.**

- Applying for instructors certificate
- Applying for Retired Federal Firearms ID
- Applying for consideration of prior out-of-state, federal, military, special forces or TDCJ training.

\_\_\_\_\_  
 Signature of Applicant Date



# Texas Administrative Code

Next Rule>>

<u>TITLE 37</u>	PUBLIC SAFETY AND CORRECTIONS
<u>PART 7</u>	TEXAS COMMISSION ON LAW ENFORCEMENT
<u>CHAPTER 217</u>	ENROLLMENT, LICENSING, APPOINTMENT, AND SEPARATION
RULE §217.1	Minimum Standards for Enrollment and Initial Licensure

(a) In order for an individual to enroll in any basic licensing course the provider must have on file documentation, acceptable to the Commission, that the individual meets eligibility for licensure.

(b) The commission shall issue a license to an applicant who meets the following standards:

(1) minimum age requirement:

(A) for peace officers and public security officers, is 21 years of age; or 18 years of age if the applicant has received:

(i) an associate's degree; or 60 semester hours of credit from an accredited college or university; or

(ii) has received an honorable discharge from the armed forces of the United States after at least two years of active service;

(B) for jailers and telecommunicators is 18 years of age;

(2) minimum educational requirements:

(A) has passed a general educational development (GED) test indicating high school graduation level;

(B) holds a high school diploma; or

(C) for enrollment purposes in a basic peace officer academy only, has an honorable discharge from the armed forces of the United States after at least 24 months of active duty service;

(3) is fingerprinted and is subjected to a search of local, state and U.S. national records and fingerprint files to disclose any criminal record;

(4) has never been on court-ordered community supervision or probation for any criminal offense above the grade of Class B misdemeanor or a Class B misdemeanor within the last ten years from the date of the court order;

(5) is not currently charged with any criminal offense for which conviction would be a bar to licensure;

(6) has never been convicted of an offense above the grade of a Class B misdemeanor or a Class B misdemeanor within the last ten years;

(7) has never been convicted or placed on community supervision in any court of an offense involving family violence as defined under Chapter 71, Texas Family Code;

(8) for peace officers, is not prohibited by state or federal law from operating a motor vehicle;

(9) for peace officers, is not prohibited by state or federal law from possessing firearms or ammunition;

(10) has been subjected to a background investigation completed by the enrolling or appointing entity into the applicant's personal history. A background investigation shall include, at a minimum, the following:

(A) An enrolling entity shall:

(i) require completion of the Commission-approved personal history statement; and

(ii) verify that the applicant meets each individual requirement for licensure under this rule based on the personal history statement and any other information known to the enrolling entity; and

(iii) contact all previous enrolling entities.

(B) In addition to subparagraph (A) of this paragraph, a law enforcement agency or law enforcement agency academy shall:

(i) require completion of the Commission-approved personal history statement; and

(ii) meet all requirements enacted in Occupations Code 1701.451, including submission to the Commission of a form confirming all requirements have been met. An in-person review of personnel records is acceptable in lieu of making the personnel records available electronically if a hiring agency and a previous employing law enforcement agency mutually agree to the in-person review.

(11) examined by a physician, selected by the appointing or employing agency, who is licensed by the Texas Medical Board. The physician must be familiar with the duties appropriate to the type of license sought and appointment to be made. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of appointment by the agency to be:

(A) physically sound and free from any defect which may adversely affect the performance of duty appropriate to the type of license sought;

(B) show no trace of drug dependency or illegal drug use after a blood test or other medical test; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory medical exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency;

(12) examined by a psychologist, selected by the appointing, employing agency, or the academy, who is licensed by the Texas State Board of Examiners of Psychologists. This examination may also be conducted by a psychiatrist licensed by the Texas Medical Board. The psychologist or psychiatrist must be familiar with the duties appropriate to the type of license sought. The individual must be declared by

that professional, on a form prescribed by the commission, to be in satisfactory psychological and emotional health to serve as the type of officer for which the license is sought. The examination must be conducted pursuant to professionally recognized standards and methods. The examination process must consist of a review of a job description for the position sought; review of any personal history statements; review of any background documents; at least two instruments, one which measures personality traits and one which measures psychopathology; and a face to face interview conducted after the instruments have been scored. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of the appointment by the agency;

(A) the commission may allow for exceptional circumstances where a licensed physician performs the evaluation of psychological and emotional health. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; or

(B) the examination may be conducted by qualified persons identified by Texas Occupations Code § 501.004. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory psychological exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency;

(13) has never received a dishonorable discharge from the armed forces of the United States;

(14) has not had a commission license denied by final order or revoked;

(15) is not currently on suspension, or does not have a surrender of license currently in effect;

(16) meets the minimum training standards and passes the commission licensing examination for each license sought;

(17) is a U.S. citizen or is a legal permanent resident of the United States, if the person is an honorably discharged veteran of the armed forces of the United States with at least two years of service before discharge and presents evidence satisfactory to the commission that the person has applied for United States citizenship.

(c) For the purposes of this section, the commission will construe any court-ordered community supervision, probation or conviction for a criminal offense to be its closest equivalent under the Texas Penal Code classification of offenses if the offense arose from:

(1) another penal provision of Texas law; or

(2) a penal provision of any other state, federal, military or foreign jurisdiction.

(d) A classification of an offense as a felony at the time of conviction will never be changed because Texas law has changed or because the offense would not be a felony under current Texas laws.

(e) A person must meet the training and examination requirements:

(1) training for the peace officer license consists of:

(A) the current basic peace officer course(s);

(B) a commission recognized, POST developed, basic law enforcement training course, to include:

(i) out of state licensure or certification; and

(ii) submission of the current eligibility application and fee; or

(C) a commission approved academic alternative program, taken through a licensed academic alternative provider and at least an associate's degree.

(2) training for the jailer license consists of the current basic county corrections course(s) or training recognized under Texas Occupations Code §1701.310;

(3) training for the public security officer license consists of the current basic peace officer course(s);

(4) training for telecommunicator license consists of telecommunicator course; and

(5) passing any examination required for the license sought while the exam approval remains valid.

(f) The commission may issue a provisional license, consistent with Texas Occupations Code §1701.311, to an agency for a person to be appointed by that agency. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a provisional license. A provisional license is issued in the name of the applicant; however, it is issued to and shall remain in the possession of the agency. Such a license may neither be transferred by the applicant to another agency, nor transferred by the agency to another applicant. A provisional license may not be reissued and expires:

(1) 12 months from the original appointment date;

(2) on leaving the appointing agency; or

(3) on failure to comply with the terms stipulated in the provisional license approval.

(g) The commission may issue a temporary jailer license, consistent with Texas Occupations Code §1701.310. A jailer appointed on a temporary basis shall be enrolled in a basic jailer licensing course on or before the 90th day after their temporary appointment. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a temporary jailer license. A temporary jailer license may not be renewed, except that the sheriff may petition the commission to extend the temporary appointment for a period not to exceed six months. A temporary jailer license expires:

- (1) 12 months from the original appointment date;
  - (2) at the end of a six-month extension, if granted; or
  - (3) on completion of training and passing of the jailer licensing examination.
- (h) A person who has previously been issued a temporary jailer license and separated from that position may be subsequently appointed on a temporary basis as a county jailer at the same or a different county jail only if the person was in good standing at the time the person separated from the position.
- (i) A person who has cumulatively served as a county jailer on a temporary basis for two years may continue to serve for the remainder of that temporary appointment, not to exceed the first anniversary of the date of the most recent appointment. The person is not eligible for an extension of that appointment or for a subsequent appointment on a temporary basis as a county jailer at the same or a different county jail until the first anniversary of the date the person separates from the temporary appointment during which the person reached two years of cumulative service.
- (j) A person whose county jailer license has become inactive may be appointed as a county jailer on a temporary basis.
- (k) The commission may issue a temporary telecommunicator license, consistent with Texas Occupations Code §1701.405. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a temporary telecommunicator license. A temporary telecommunicator license expires:
- (1) 12 months from the original appointment date; or
  - (2) on completion of training and passing of the telecommunicator licensing examination. On expiration of a temporary license, a person is not eligible for a new temporary telecommunicator license for one year.
- (l) A person who fails to comply with the standards set forth in this section shall not accept the issuance of a license and shall not accept any appointment. If an application for licensure is found to be false or untrue, it is subject to cancellation or recall.
- (m) The effective date of this section is April 1, 2024.

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Source Note: The provisions of this §217.1 adopted to be effective November 1, 2014, 39 TexReg 7935; amended to be effective February 1, 2016, 41 TexReg 274; amended to be effective May 1, 2018, 43 TexReg 1879; amended to be effective February 5, 2020, 45 TexReg 765; amended to be effective June 1, 2022, 47 TexReg 2883; amended to be effective April 1, 2024, 49 TexReg 1967

33. DESCRIPTION OF TESTS PERFORMED AND CONCLUSIONS, INCLUDING ANY EXISTING CONDITIONS OR RESTRICTIONS (ATTACH ADDITIONAL PAGES AS NEEDED)		
34. DATE MEDICAL EXAMINATION PERFORMED:		
35. I certify that I have completed a medical examination of the above-named individual. I have concluded that the individual:		
<input type="checkbox"/> <b>IS</b> physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.	<input type="checkbox"/> <b>IS NOT</b> physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.	
PRACTITIONER NAME (TYPE OR PRINT)	PRACTITIONER SIGNATURE	DATE
<b>STATE LAW AND COMMISSION RULES REQUIRE THAT A MEDICAL EXAMINATION BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE MEDICAL EXAMINATION. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.</b>		

**DRUG SCREEN (TO BE COMPLETED BY PRACTITIONER)**

36. Practitioner Type				
<input type="checkbox"/> PHYSICIAN	<input type="checkbox"/> PHYSICIAN'S ASSISTANT	<input type="checkbox"/> NURSE PRACTITIONER	<input type="checkbox"/> DoT PROVIDER	
37. PRACTITIONER LAST NAME	38. PRACTITIONER FIRST NAME	39. LICENSE NUMBER	40. EMAIL	
41. MAILING ADDRESS	42. CITY	43. STATE	44. ZIP CODE	45. PHONE NUMBER
46. DATE DRUG SCREEN PERFORMED:				
47. I certify that I have completed a drug screen of the above-named individual. I have concluded after a blood test or other medical test that the individual:				
<input type="checkbox"/> shows no trace of drug dependency or illegal drug use.		<input type="checkbox"/> shows traces of drug dependency or illegal drug use.		
PRACTITIONER NAME (TYPE OR PRINT)	PRACTITIONER SIGNATURE	DATE		
<b>STATE LAW AND COMMISSION RULES REQUIRE THAT A DRUG SCREEN BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE DRUG SCREEN, AS WELL AS A DoT PROVIDER. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.</b>				

**Examining Practitioner:** After completing the above requested examination sections, return this form and any additional documents by mail or email to the requesting academy or law enforcement agency. If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, please submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov).

**Requesting Academy or Agency:** If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov) within 30 days of the examination.

This L-2 Form remains valid for 180 days from the individual's graduation date from the academy, if accepted by the appointing agency, or is valid for 180 days from the date signed by the practitioner, unless withdrawn or invalidated.

**THIS DOCUMENT IS CONFIDENTIAL AND NOT SUBJECT TO DISCLOSURE UNDER THE PUBLIC INFORMATION ACT, GOVERNMENT CODE CHAPTER 552.**

33. DESCRIPTION OF TESTS PERFORMED AND CONCLUSIONS, INCLUDING ANY EXISTING CONDITIONS OR RESTRICTIONS (ATTACH ADDITIONAL PAGES AS NEEDED)

34. DATE MEDICAL EXAMINATION PERFORMED:

35. I certify that I have completed a medical examination of the above-named individual. I have concluded that the individual:

IS

physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.

IS NOT

physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.

PRACTITIONER NAME (TYPE OR PRINT)

PRACTITIONER SIGNATURE

DATE

STATE LAW AND COMMISSION RULES REQUIRE THAT A MEDICAL EXAMINATION BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE MEDICAL EXAMINATION. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.

**DRUG SCREEN (TO BE COMPLETED BY PRACTITIONER)**

36. Practitioner Type

PHYSICIAN       PHYSICIAN'S ASSISTANT       NURSE PRACTITIONER       DOT PROVIDER

37. PRACTITIONER LAST NAME      38. PRACTITIONER FIRST NAME      39. LICENSE NUMBER      40. EMAIL

41. MAILING ADDRESS      42. CITY      43. STATE      44. ZIP CODE      45. PHONE NUMBER

46. DATE DRUG SCREEN PERFORMED:

47. I certify that I have completed a drug screen of the above-named individual. I have concluded after a blood test or other medical test that the individual:

shows no trace of drug dependency or illegal drug use.

shows traces of drug dependency or illegal drug use.

PRACTITIONER NAME (TYPE OR PRINT)

PRACTITIONER SIGNATURE

DATE

STATE LAW AND COMMISSION RULES REQUIRE THAT A DRUG SCREEN BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE DRUG SCREEN, AS WELL AS A DOT PROVIDER. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.

**Examining Practitioner:** After completing the above requested examination sections, return this form and any additional documents by mail or email to the requesting academy or law enforcement agency. If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, please submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov).

**Requesting Academy or Agency:** If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov) within 30 days of the examination.

This L-2 Form remains valid for 180 days from the individual's graduation date from the academy, if accepted by the appointing agency, or is valid for 180 days from the date signed by the practitioner, unless withdrawn or invalidated.

THIS DOCUMENT IS CONFIDENTIAL AND NOT SUBJECT TO DISCLOSURE UNDER THE PUBLIC INFORMATION ACT, GOVERNMENT CODE CHAPTER 552.

# TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E. Highway 290, STE. 200  
Austin, Texas 78723-1035  
Phone: (512) 936-7700  
<https://www.tcole.texas.gov>

## LICENSEE PSYCHOLOGICAL AND EMOTIONAL HEALTH DECLARATION (L-3) Occupations Code § 1701.306; Commission Rules §§ 217.1, 217.7, 221.35, 227.4

### INDIVIDUAL INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

1. TCOLE PID	2. INDIVIDUAL LAST NAME	3. INDIVIDUAL FIRST NAME	4. M.I.	5. SUFFIX (Jr., etc.)	
6. HOME MAILING ADDRESS		7. CITY	8. STATE	9. ZIP CODE	10. EMAIL
11. LICENSE TYPE SOUGHT (FOR STUDENT SEEKING ENROLLMENT IN ACADEMY – DO NOT CHECK IF SEEKING APPOINTMENT)					
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> TELECOMMUNICATOR <input type="checkbox"/> SCHOOL MARSHAL					
12. APPOINTMENT TYPE(S) SOUGHT (FOR LICENSEE SEEKING APPOINTMENT WITH AGENCY – DO NOT CHECK IF SEEKING ENROLLMENT)					
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> RESERVE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> TELECOMMUNICATOR					
<input type="checkbox"/> SCHOOL MARSHAL <input type="checkbox"/> PUBLIC SECURITY OFFICER <input type="checkbox"/> JUVENILE PROBATION OFFICER					

### ACADEMY OR AGENCY INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

13. TCOLE NUMBER	14. ACADEMY OR AGENCY NAME	15. EMAIL			
16. MAILING ADDRESS		17. CITY	18. STATE	19. ZIP CODE	20. PHONE NUMBER

### INDIVIDUAL ACKNOWLEDGEMENT AND RELEASE (TO BE COMPLETED BY INDIVIDUAL)

21. I hereby authorize the release of my Personal History Statement and any other background investigation documents to the examining practitioner. I also hereby authorize the release of the results of this psychological examination and any other relevant information to the above requesting academy or law enforcement agency and the Texas Commission on Law Enforcement.

INDIVIDUAL NAME (TYPE OR PRINT)

INDIVIDUAL SIGNATURE

DATE

**Attention Requesting Academy or Agency and Examining Practitioner:** State Law and Commission Rules require that a psychological examination be performed by a psychologist or psychiatrist licensed in Texas, except in exceptional circumstances when, upon prior approval by TCOLE, it may be performed by a qualified physician licensed in Texas. The chief administrator of the requesting agency must request prior approval in writing and must receive written approval from TCOLE before a psychological examination performed by a physician is acceptable.

**Requesting Academy or Agency:** After the above sections are completed, submit this form along with a description of job duties for the license or appointment sought, a copy of the individual's Personal History Statement, and any background investigation documents (if applicable) by mail or email to the practitioner selected by the academy or agency.

**Examining Practitioner:** The psychological examination must be conducted pursuant to professionally recognized standards and methods. The examination process must consist of a review of the description of job duties for the license or appointment sought, a review of the Personal History Statement, and a review of any background investigation documents (if applicable). The examination must consist of at least two instruments, one which measures personality traits and one which measures psychopathology, and a face-to-face interview conducted after the instruments have been scored. Given the nature of law enforcement and the potential consequences to the agency, the individual, and the public, the purpose of the psychological examination is to determine whether the individual is in satisfactory psychological and emotional health to serve as the type of law enforcement officer for which the license or appointment is sought.



**PSYCHOLOGICAL AND EMOTIONAL HEALTH EXAMINATION (TO BE COMPLETED BY PRACTITIONER)**

22. PRACTITIONER LICENSE TYPE				
<input type="checkbox"/> PHYSICIAN		<input type="checkbox"/> PSYCHOLOGIST		<input type="checkbox"/> PSYCHIATRIST
23. PRACTITIONER LAST NAME	24. PRACTITIONER FIRST NAME	25. LICENSE NUMBER	26. EMAIL	
27. MAILING ADDRESS		28. CITY	29. STATE	30. ZIP CODE
				31. PHONE NUMBER
32. DESCRIPTION OF TESTS OR METHODOLOGIES PERFORMED AND CONCLUSIONS, INCLUDING ANY EXISTING CONDITIONS (ATTACH ADDITIONAL PAGES AS NEEDED)				
33. DATE PSYCHOLOGICAL EXAMINATION PERFORMED:				
34. I certify that I have completed a psychological and emotional health examination of the above-named individual pursuant to professionally recognized standards and methods. I have concluded that the individual:				
<input type="checkbox"/> <b>IS</b>		<input type="checkbox"/> <b>IS NOT</b>		
in satisfactory psychological and emotional health to serve as the type of licensee for the license or appointment sought.		in satisfactory psychological and emotional health to serve as the type of licensee for the license or appointment sought.		
PRACTITIONER NAME (TYPE OR PRINT)		PRACTITIONER SIGNATURE		DATE
STATE LAW AND COMMISSION RULES REQUIRE THAT A PSYCHOLOGICAL EXAMINATION BE PERFORMED BY A PSYCHOLOGIST OR PSYCHIATRIST LICENSED IN TEXAS, OR BY A QUALIFIED PHYSICIAN LICENSED IN TEXAS WITH PRIOR APPROVAL FROM TCOLE. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.				

**Examining Practitioner:** After completing the above examination section, return this form and any additional documents by mail or email to the requesting academy or law enforcement agency. If the individual is determined to not be in satisfactory psychological or emotional health to serve, please submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov).

**Requesting Academy or Agency:** If the individual is determined to not be in satisfactory psychological or emotional health to serve, submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov) within 30 days of the examination.

For school marshal applicants and licensees, this L-3 Form remains valid for 90 days from the date signed by the practitioner, unless withdrawn or invalidated. For all other applicants and licensees, this L-3 Form remains valid for 180 days from the individual's graduation date from the academy, if accepted by the appointing agency, or is valid for 180 days from the date signed by the practitioner, unless withdrawn or invalidated.

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**FINGER PRINT INSTRUCTION FORM**  
**TEXAS COMMISSION ON LAW ENFORCEMENT**  
**(TCOLE/Service Code 11G4J8)**

1. Schedule an appointment to be electronically fingerprinted by MorphoTrust USA at one of their IdentoGo enrollment centers.
  - Internet based scheduling is the quickest and most convenient way to obtain a fingerprint appointment.
    - a. **You may begin the process now by simply clicking on this link:**  
<https://identogo.com>
    - b. Select **TEXAS** from the dropdown (click "Go" once selected)
    - c. Click on Digital Fingerprinting
    - d. Enter Service Code: **11G4J8** (click "Go" once selected)
    - e. Schedule your appointment accordingly.
    - f. Complete online form (click "Next" once completed)
    - g. Enter Academy Number: **LE-511283** (click "Next" once typed)
    - h. Continue to fill out online form accordingly (click "Next") until finished
  - If you prefer to schedule over the telephone, you must:
    - a. Have your Service Code ready (**11G4J8**), then call **888.467.2080**;
    - b. MorphoTrust will prompt you for the Service Code (**11G4J8**);
    - c. Schedule your appointment accordingly.
2. Arrive at your scheduled appointment with your photo identification and fee (\$39.75).
  - If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here:  
<http://www.t1enrollment.com/state/forms/tx/55fc619a7f7aa.doc>
  - MorphoTrust accepts Visa/MasterCard/Discover/American Express, business checks, money orders and coupon codes (employer accounts) at the time of service.
  - Please note that personal checks and cash are **not accepted**.
3. Your fingerprints will be submitted electronically to DPS and the FBI. You will not receive a printed fingerprint card.
4. At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an IdentoGo receipt stating that you were fingerprinted.
  - Do not throw away the receipt;
  - You may check status on your submission by clicking on this link:  
<https://uenroll.identogo.com/servicecode/11G4J8> and then;
  - Click "**Check Status**"

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes.



## How to Order a Driver Record

You may order a driver record for a Texas driver license, commercial driver license or identification card online or by mail. The Department cannot provide in-person driver record services at any of our locations. To determine the **types** of driver records available, see below.

If you would like to review the current status of your driver license, please visit our **driver eligibility** page.

### Order Your Driver Record Online

The most convenient way to obtain a driver record is online. To order a record online, you must know the type of driver record you need and have the following information available to begin the online transaction.

1. Your most recently issued Texas driver license, commercial driver license or identification card number
2. The **audit number** from that card (See below to locate your audit number)
3. Your date of birth
4. Last 4 digits of your Social Security Number
5. Adobe Reader ([Download Adobe Reader](#))
6. The latest version of one of the following browsers\*:
  - a. Google Chrome
  - b. Internet Explorer
  - c. Mozilla Firefox
  - d. Safari

\*The Microsoft Edge Browser is not compatible with this service at this time. If you utilize Microsoft Edge to purchase your record, you will not be able to print. Please use one of the approved browsers listed above to complete your request.

7. A valid credit card (Visa, MasterCard, Discover, or American Express) for the appropriate fee
8. The ability to print the record immediately after purchase

Driver Record Type	Information
<b>Type 1</b> Status record \$4.00	<ul style="list-style-type: none"><li>• Date of birth, license status, home address and original Texas driver license application date.</li></ul>

## **Is the AACOG Law Enforcement Academy Right for Me?**

**The AACOG Regional Law Enforcement Academy is a vocational training organization that prides itself on preparing people for a career in public service as law enforcement officers, corrections officers, and first responder emergency dispatchers.**

**In order to achieve this, the Academy is a structured para-military environment with its own rules and expectations for police cadets attending basic peace officer training. These rules and expectations mimic that of policing agencies, and as such, this better prepares police cadets for entering the law enforcement profession and meeting the expectations of future employers.**

**With this said, over the years Academy staff have addressed cadet performance issues in the cadet classes held. Some of the most frequently violated rules staff have dealt with include:**

- 1. Excessive Tardiness and/or Absences**
- 2. Cell phone/Smart phone usage during class & training sessions**
- 3. Sleeping in Class**
- 4. Not meeting the Minimum Academic Standards of the Academy**
- 5. Disrespect towards other Cadets**

**Many people who have violated these rules and have not improved in their actions have eventually been removed from the basic peace officer program.**

**To ensure your success in the program, it is highly recommended you make sure you are going to follow these rules and the other rules of the Academy. Everyone accepted into the basic peace officer program will have the rules of the Academy shared with them during class orientation, and they will need to provide written acknowledgement they have read and understood these rules.**

**If you feel there are concerns or issues in your current situations in life that may prevent you from meeting the expectations of the AACOG Basic Peace Officer Program, you may want to reconsider applying for the Academy until you know you will be able to meet the established standards of the program.**

## BPOC 2025 COURSE INFORMATION

### 2025 Bravo

Orientation Day: 3/31/25  
First Day of Class: 4/21/25  
Graduation: 10/07/25

**Deadline for all forms to Academy: 3/17/25**

### 2025 Charlie

Orientation Day: 7/21/25  
First Day of Class: 8/11/25  
Graduation: 2/2026 – TBA

**Deadline for all forms to Academy: 7/07/25**

*\*All graduation are anticipated to occur on scheduled dates, if there are no delays due to any unforeseen incident*

*\*\*Please note the entrance exam is valid for one year from day taken and applicants may apply for the next academy class if they decide to, as long as their completed documentation does not exceed the **180 day** expiration date per TCOLE rules.*

Until your uniforms are delivered, you are expected to adhere to the dress code as follows:

#### DRESS CODE:

##### Male Cadets

Plain White L/S Dress shirt w/collar & black tie  
Black Dress Slacks  
Black Dress shoes w/black socks  
No beards or goatees  
Close cut hairstyle  
No visible body piercings  
Watch/Wedding Ring (no other jewelry accepted)

##### Female Cadets

Plain White L/S Dress shirt w/collar & black tie  
Black Dress slacks  
Black Dress Shoes  
Hair must be above collar  
No visible body piercings  
Watch/Wedding Ring (no other jewelry accepted)  
No acrylic nails allowed / nails to measure no further than end of fingers

\*Hair must be a natural hair color\*

\*L/S = Long Sleeve\*



## Sponsoring Agency Check List:

Please email the following to:  
[livelazquez@aacog.gov](mailto:livelazquez@aacog.gov) / [academy@aacog.gov](mailto:academy@aacog.gov)  
Contact us with any questions  
210-362-5291 / 210-362-5215

- Registration Form
- Entrance Exam Results
- Birth Certificate *or* Naturalization Certificate (Proof of US Citizenship)
- High School Diploma/GED/ College Transcripts
- Valid Driver's License (Must be valid)
- Proof of Auto Liability Insurance (Must be valid)
- DD-214 for ALL prior Military     N/A
- Release of Liability and Hold Harmless Agreement [**Signed and notarized**]
- Informed Consent Form
- C-1 - PID Assignment [signed by applicant]
- L-2 Declaration of Medical Condition [signed by physician]
- Drug Screen Lab Report/Results
- Physical Fitness Assessment Results
- Personal History Statement [**Signed and notarized**]
- Driving Record
- L-3 [Emotional and Psychological Health Declaration signed by a licensed psychologist or physician selected by the employing agency or the Academy]
- Please provide us your invoicing information. The academy will invoice for half of the tuition (\$1900.00) per cadet, unless requested otherwise by the agency. The academy's BPOC tuition is \$3800.00 for the course.

### NOTE:

- Background Check Return [F.A.S.T. Form] will need to be completed by applicant and results will be sent directly to the Academy by TCOLE. [Highlighted codes in section 1. D) & G) are required to be entered to receive the results at our academy].